

RCE
JFWPlease Direct All Correspondence to Customer Number **20995****REQUEST FOR CONTINUED EXAMINATION**

Applicant : Jerome Legerton et al.
App. No : 10/657,061
Filed : September 5, 2003
For : HYBRID CONTACT LENS SYSTEM
AND METHOD
Examiner : Jessica T. Stultz
Art Unit : 2873

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

(Date)

Linda H. Liu, Reg. No. 51,240

Mail Stop RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

- (X) Please enter the Amendment After Final filed on January 23, 2006 and the Supplemental Response to Final Office Action filed January 27, 2006.
- (X) Copy of Amendment After Final in 11 pages filed on January 23, 2006.
- (X) Copy of Declaration of Jerome Legerton in 4 pages, filed with Amendment After Final on January 23, 2006.
- (X) Copy of Declaration of William E. Meyers in 5 pages, filed with Amendment After Final on January 23, 2006.
- (X) Copy of Declaration of Joseph T. Barr in 4 pages, filed with Supplemental Response to Final Office Action on January 27, 2006.
- (X) Copy of Declaration of Dr. James A. Boucher in 5 pages, filed with Supplemental Response to Final Office Action on January 27, 2006.
- (X) Return Postcard.

03/01/2006 YPOLITE1 00000088 10657061

01 FC:2801 395.00 OP

03/01/2006 YPOLITE1 00000088 10657061

02 FC:2253 285.00 OP

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2. Fees:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
RCE Fee		2801 (\$395)		\$395
Suspension of Action		1463 (\$130)		\$0
Total Claims	29 - 43 = 0	2202 (\$25)	0 x 25 =	\$0
Independent Claims	3 - 4 = 0	2201 (\$100)	0 x 100 =	\$0
Multiple Claim		2203 (\$180)		\$0
3 Month Extension		2253 (\$510)		\$285*
*\$225 fee for 2 month extension paid on January 23, 2006.				
			TOTAL FEE DUE	\$680

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

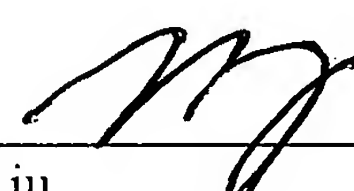
3. Payment:

(X) Check in the amount of \$680 to cover the above fees.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Respectfully submitted,
KNOBBE MARTENS OLSON & BEAR LLP

Dated: February 22, 2006


Linda H. Liu
Registration No. 51,240
Attorney of Record
Customer No. 20,995
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